

Oral health care for older adults

Nevada State Oral Health Advisory Committee

Community Coalition for Oral Health

Northern Nevada Dental Coalition
for Underserved Populations (CUSP)



What is the Public Health Issue?

Oral health is integral to general health.¹ Over the past several decades, better preventive and therapeutic oral health interventions, including increased use of fluoride, have led to improved oral health in older adults and lower rates of complete tooth loss.¹ However, certain groups of older adults including minorities, low income and the uninsured still suffer disproportionately from poor oral health². Older adults who smoke have seven times the risk of developing gum disease and are also at an increased risk for developing oral cancer.²

Oral health issues for Americans >65 years old²:

- ✓ 30% with complete tooth loss from tooth decay and gum disease
- ✓ Decay: 30% with active, untreated decay³
- ✓ Gum disease: 23% with severe disease
- ✓ Oral cancers
- ✓ Dry mouth due to medications or disease
- ✓ Neurological diseases affecting nerves in mouth

For economically disadvantaged older Americans, paying for oral health care services can be difficult. In 1995, only 22% of older Americans were covered by private dental insurance.³ Medicare only covers limited services needed by hospitalized patients with specific conditions. Medicare does not cover routine dental services, such as preventive care that would include tooth cleaning or screening for oral cancers. Medicaid programs are not required to include dental services for individuals over 20 years of age, and most state programs offer little or no dental coverage for adults. Consequently, the majority of older Americans must pay for oral health care out of pocket.

How is Nevada doing?

Healthy People U.S. 2010 related objective⁴:

- ✓ Reduce percentage of adults 65+ who have lost all their teeth to 20%.
- ✓ Reduce prevalence of smoking in adults to $\leq 12\%$.



In September 2003, Oral Health America released *A State of Decay: The Oral Health of Older Americans*. Nevada received an overall grade of D+. Adult dental Medicaid received a grade of F.⁵ A state survey conducted in 2002 showed that almost 20% of Nevada adults over 65 had lost all their permanent teeth.⁶ In 1999, it was estimated that at least 38.5% of Nevada seniors have no third party payer for oral health prevention and treatment coverage⁷. Finally, a recent survey indicates that 26% of Nevada adults over the age of 18 are current smokers⁶, a prevalence slightly higher than the national average of 23.4%.

What is Nevada doing?

- **Community water fluoridation** prevents decay and provides a protective benefit to older adults. Only about 69.4% of Nevada's total population receives fluoridated water.⁸
- **Through the Donated Dental Services Program**, dentists volunteer to provide comprehensive dental care at no charge to people of all ages who, because of a serious disability, advanced age, or medical problems, lack adequate income to pay for needed dental care. From December 30, 1999 through June 1, 2002, 48 patients were provided with \$134,349 worth of treatment.

Strategies for Nevada's future:

- ✓ *Continue supporting and funding water fluoridation.*
- ✓ *Educate and empower older adults about the benefits of water fluoridation, twice daily brushing with fluoride toothpaste, and smoking cessation.*
- ✓ *Promote expansion of insurance coverage to provide oral health care for seniors.*

References:

1. U.S. Department of Health and Human Services. *Oral Health in America: a report of the Surgeon General*. Rockville, MD: U.S. Department of Health and Human Services, National Institute of Dental and Craniofacial Research, National Institutes of Health 2000.
2. CDC fact sheet: Oral Health for Older Americans. <http://www.cdc.gov/OralHealth/factsheets/adult-older.htm>
3. Vargas CM, Kramarow EA, Yellowitz JA. The Oral Health of Older Americans. Aging Trends; No. 3. Hyattsville, MD. National Center for Health Statistics. 2001.
4. US Department of Health and Human Services, Healthy People 2010. Washington DC: 2000. www.health.gov/healthypeople/
5. *Oral Health America*. A State of Decay: The Oral Health of Older Americans, 2003.
6. Centers for Disease Control and Prevention. Behavioral Risk Factor Surveillance Survey results 2002. <http://apps.nccd.cdc.gov/brfss/>
7. Cristman Associates. *An Oral Health Needs Assessment of Nevada Seniors, 1999*.
8. Nevada State Health Division, Bureau of Family Health Services, Oral Health Program Report, 2003.

Funding for this document was provided by the Centers for Disease Control and Prevention through the Chronic Disease Prevention and Health Promotion Programs Component 4: State-Based Oral Disease Prevention Program (U58/CCU922830-01-2). The contents of this report are solely the responsibility of the authors and do not necessarily represent the official views of the CDC.